Recipient Committee Campaign Statement (Government Code Sections 84200-84216.5)	Type or print in	ink.	Date Stamp	2	CALIFORNIA 2001/02 FORM		
	Statement covers period from _06/24/2018	Date of election if applicable: (Month, Day, Year)		Page	e 1 of 28 For Official Use Only		
SEE INSTRUCTIONS ON REVERSE	through_06/30/2018						
1. Type of Recipient Committee: All Committee Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5.) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee	mittees - Complete Parts 1,2,3, and 4. Ballot Measure Committee Primary Formed Controlled Sponsored (Also Complete Part 6.) Primary Formed Candidate/ Officeholder Committee (Also Complete Part 7.)	2. Type of Stateme Pre-election Statem Semi-annual Statem Termination Statem Amendment (Expla	nent ment nent iin below)	Specia Supple	rly Statement Il Odd-Year Report emental Preelection nent - Attach Form 495		
3. Committee Information COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTE San Diego County Democratic Party	I.D.NUMBER 741906 EE	Treasurer(s) NAME OF TREASURER Shawnda Deane					
STREET ADDRESS (NO P.O. BOX)		MAILING ADDRESS					
CITY STATE ZIP OF SAN Diego CA 92111 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O	CODE AREA CODE/PHONE BOX	CITY Sacramento NAME OF ASSISTANT TREASUR	STATE CA RER, IF ANY	ZIP CODE 95815	AREA CODE/PHON (916) 285-5733		
CITY STATE ZIP C Sacramento CA 95815	CODE AREA CODE/PHONE	MAILING ADDRESS					
OPTIONAL: FAX/E-MAIL ADDRESS		CITY	STATE	ZIP CODE	AREA CODE/PHON		
SDCDPState@deaneandcompany.com		OPTIONAL: FAX/E-MAIL ADDRES	SS				

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on	09/23/2018	Bv ^{Shawnda} 1	Deane
	DATE		SIGNATURE OF TREASURER OR ASSISTANT TREASURER
Executed on_		By	
	DATE	SIGNATUR	RE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR
Executed on_		Bv	
	DATE	,	SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT
Executed on_		By	
	DATE	•	SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC State of California

COVER PA	GE - PART 2
CALIFORNIA FORM	460

Page	2	of	28
ı aye			

Officeholder or Candidate Controlled	d Committee	6.	. Ballot Measure Co	mmittee			
NAME OF OFFICEHOLDER OR CANDIDATE	_		NAME OF BALLOT MEASURE				
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRI	CT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	DN		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP		Identify the controlling office	ceholder, cand	idate, or state	measure prop	onent, if any.
			NAME OF OFFICEHOLDER, CA	NDIDATE, OR PF	ROPONENT		
Related Committees Not Included in this St not included in this statement that are controlled by you or are contributions or to make expenditures on behalf of your cand	e primarily formed to receive		OFFICE SOUGHT OR HELD			DISTRICT NO.	F ANY
COMMITTEE NAME	I.D.NUMBER	7.	Primarily Formed (E List names o	of officeholder(s	s) or candidate(s) Ffc
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	HT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	HT OR HELD	SUPPORT
CITY STATE ZIP	CODE AREA CODE/PHONE						OPPOSE
COMMITTEE NAME	I.D.NUMBER		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	HT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUG	HT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)	·						
CITY STATE ZIP	CODE AREA CODE/PHONE		Attac	h continuation	sheets if nece	ssary	

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Type or print in ink.
Amounts may be rounded to whole dollars.

CALIFORNIA FORM Statement covers period from <u>06/24/2018</u> through $\underline{06/30/2018}$ Page 3 of $\frac{28}{}$ I.D. NUMBER

SUMMARY PAGE

San Diego County Democratic Party				741906	
Contributions Received	Column B CALENDAR YEAR TOTAL TO DATE		ar Summary for Both the State		
1. Monetary Contributions Schedule A, Line 3	\$53,625.00	\$1,392,549.70	General Lie	Cuons	
2. Loans Received Schedule B, Line 7	\$0.00	\$0.00		1/1 through 6/30	7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$53,625.00	\$1,392,549.70	20. Contribution Received	\$.00	\$.00
4. Nonmonetary Contributions Schedule C, Line 3	\$0.00	\$11,476.13	21. Expenditures		
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$53,625.00	\$1,404,025.83	Made	\$.00	\$.00
Expenditures Made			Expenditure	Limit Summa	ry for State
6. Payments Made Schedule E, Line 4	\$53,824.80	\$1,379,939.18	Candidates		
7. Loans Made Schedule H, Line 7	\$0.00	\$0.00		mulative Expen	
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$53,824.80	\$1,379,939.18	(If Sub	ject to Voluntary Ex	penditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	(\$7,711.95)	\$3,313.29	_ Date of Election (mm/dd/yy)		Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3	\$0.00	\$11,476.13	(11111/44)	(yy)	
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$46,112.85	\$1,394,728.60			
Current Cash Statement			1		
12. Beginning Cash Balance Previous Summary Page, Line 16	\$170,863.33	To calculate Column B, add amounts in Column A to the			
13. Cash Receipts Column A, Line 3 above	\$53,625.00	corresponding amounts			
14. Miscellaneous Increases to Cash Schedule I, Line 4	\$7,500.00	from Column B of your last report. Some amounts in			
15. Cash Payments Column A, Line 8 above	\$53,824.80	Column A may be negative			
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$178,163.53	figures that should be subtracted from previous			
If this is a termination statement, Line 16 must be zero.		period amounts. If this is the first report being filed			
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$0.00	for this calendar year, only carry over the amounts			
Cash Equivalents and Outstanding Debts	40.00	from Lines 2, 7, and 9 (if any).	*Since January	1, 2001. Amounts in	n this section may b
18. Cash Equivalents See instructions on reverse	\$0.00	-	dinerent nom an	nounts reported in t	Joianni D.
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$3,313.29	-	FPP	FPPC I C Toll-Free Helpli	Form 460 (June/01 ne: 866/ASK-FPPC

Schedule A Monetary Contributions Received

Type or print in ink.
Amounts may be rounded

SCHEDULE A	

Monetary Contributions Received		to	whole dollars.	from06/24/201	018		FORM 460	
SEE INSTRUCTIO	NS ON REVERSE			through06/30/201	18	Page _	4 of 28	
NAME OF FILER San Diego County	Democratic Party					I.D. Nu 741906		
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE CALENDAR (JAN. 1 - D	RYEAR	PER ELECTION TO DATE (IF REQUIRED)	
6/29/2018	California Teachers Association/Association for Better Citizenship PAC Small Contributor Committee Burlingame, CA 94010 Committee ID: 741941	☐ IND ☐ COM ☐ OTH ☐ PTY ■ SCC		\$32,500.00	\$32,500.00			
6/29/2018	CPM LTD, Inc. dba Manpower San Diego San Diego, CA 92101	☐ IND ☐ COM ■ OTH ☐ PTY ☐ SCC		\$10,000.00	\$35,000.00			
6/26/2018	James Elia for State Assembly 2018 El Cajon, CA 92019 Committee ID: 1400530	☐ IND COM ☐ OTH ☐ PTY ☐ SCC		\$250.00	\$2,150.00			
	INTERMEDIARY ActBlue Cambridge, MA 02138	IND COM OTH PTY SCC						
6/29/2018	Paloma Aguirre for Imperial Beach City Council 2018 Imperial Beach, CA 91932 Committee ID: 1404066	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$300.00	\$300.00			
			SUBTOTA	L				
1. Amount red	A Summary ceived this period - contributions of \$100 or more. I Schedule A subtotals.)		_ 5	553,550.00				
2. Amount red	ceived this period - unitemized contributions of less th	nan \$100		375.00		OTH - Other PTY - Politic		
	etary contributions received this period. 1 and 2. Enter here and on the Summary Page, Col	umn A, Line 1	.)TOTAL	553,625.00			Contributor Committee	

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded

SCH	IEDI	ΠE	Δ	(CONT	-

CALIFORNIA

Statement covers period

,		10	from06/24/2018		8	FORM 40	
SEE INSTRUCTIO	NS ON REVERSE			through06/30/2013	8	Page _	5 of 28
NAME OF FILER						I.D. Nu	mber
San Diego County	Democratic Party					741906	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
6/29/2018	Plumbers & Steamfitters Local Union No. 230 PAC Small Contributor Committee San Diego, CA 92121 Committee ID: 891894	☐ IND ☐ COM ☐ OTH ☐ PTY ■ SCC		\$5,000.00	\$32,500.00		
6/29/2018	Southern California Pipe Trades District Council No. 16 PAC Small Contributor Committee Los Angeles, CA 90020 Committee ID: 760715	☐ IND ☐ COM ☐ OTH ☐ PTY ■ SCC		\$2,500.00	\$17,500.00		
6/29/2018	Steamfitters & Refrigeration U.A. Local #250 PAC Small Contributor Committee Gardena, CA 90248 Committee ID: 743959	☐ IND ☐ COM ☐ OTH ☐ PTY ■ SCC		\$3,000.00	\$3,000.00		
		IND COM OTH PTY SCC					
		IND COM OTH PTY SCC					

SUBTOTAL \$53,550.00

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH - Other

PTY - Political Party

SCC - Small Contributor Committee

Schedule B – Part 1

Type or print in ink. Amounts may be rounded

	SCHEDULE B - PART				
Statement covers period	CALIFORNIA A CO				
m 06/24/2018	CALIFORNIA 460				

Loans Received	1	to whole dollars. from <u>06/24/2018</u>			FORM 40			
SEE INSTRUCTIONS ON REVERSE					through	018	Page 6	of <u>28</u>
NAME OF FILER							I.D. NUMBER	
San Diego County Democratic Party							741906	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
				PAID				CALENDAR YEAR
				FORGIVEN		% RATE		PER ELECTION**
☐IND ☐ COM☐OTH ☐ PTY ☐ SCC				·	DATE DUE		DATE INCURRED	
				PAID				CALENDAR YEAR
				FORGIVEN		RATE		PER ELECTION**
☐IND ☐ COM☐OTH ☐ PTY ☐ SCC					DATE DUE		DATE INCURRED	
				PAID				CALENDAR YEAR
				FORGIVEN		RATE		PER ELECTION**
☐IND ☐ COM☐OTH ☐ PTY ☐ SCC					DATE DUE		DATE INCURRED	
		SUBTOTALS						
Schedule B Summary 1. Loans received this period (Total Column (b) plus unitemized loans	s less than \$100.)						Enter (e) on Schedule E, Line 3)	
2. Loans paid or forgiven this period (Total Column (c) plus loans under \$10 (Include loans paid by a third party that		dule A.)					* Amounts forgi another party a reported on Scl	iven or paid by Iso must be nedule A.
3. Net change this period. (Subtract Lin Enter the net here and on the Summary					Net (may be a neg	ative number)	** If required.	
*Contributor Codes IND-Individual COM-Recipient Committee (o	other than PTY or SCC)	OTH-Other PTY	-Political Party	SCC-Small Cor	ntributor Committee	FPPC -	FPPC For	rm 460 (June/01)

Schedule B - Part 2 Loan Guarantors

Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE B - PART 2
Statement covers period	CALIFORNIA 460
from <u>06/24/2018</u>	FORM TOO
through <u>06/30/2018</u>	Page <u>7</u> of <u>28</u>

SEE INSTRUCTIONS ON REVERSE	through <u>06/30/2018</u>	Page 7 of 28
NAME OF FILER San Diego County Democratic Party		I.D. Number 741906

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
			LENDER		CALENDAR YEAR	
	☐ COM ☐ OTH ☐ PTY ☐ SCC		DATE		PER ELECTION (IF REQUIRED)	
			LENDER		CALENDAR YEAR	
	☐ IND ☐ COM					1
	☐ OTH ☐ PTY		DATE		PER ELECTION (IF REQUIRED)	
	scc					
	☐ IND ☐ COM		LENDER		CALENDAR YEAR	
	OTH PTY SCC		DATE		PER ELECTION (IF REQUIRED)	
	☐ IND ☐ COM		LENDER		CALENDAR YEAR	
	OTH PTY SCC		DATE		PER ELECTION (IF REQUIRED)	
			SUBTOTAL		Enter on Summary Page, Line 17 only.	

Schedule C Type or print in ink. SCHEDULE C Amounts may be rounded **Nonmonetary Contributions Received** Statement covers period **CALIFORNIA** to whole dollars. **FORM** 06/24/2018 from through $\frac{06/30/2018}{}$ of 28Page 8 SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. Number San Diego County Democratic Party 741906 **CUMULATIVE TO** IF AN INDIVIDUAL, ENTER AMOUNT/ PER ELECTION FULL NAME. STREET ADDRESS AND CONTRIBUTOR **DESCRIPTION OF** DATE DATE OCCUPATION AND EMPLOYER FAIR MARKET TO DATE CODE * GOODS OR SERVICES CALENDAR YEAR ZIP CODE OF CONTRIBUTOR RECEIVED (IF SELF-EMPLOYED, ENTER **VALUE** (IF REQUIRED) (IF COMMITTEE, ALSO ENTER I.D. NUMBER) (JAN 1 - DEC 31) NAME OF BUSINESS) СОМ PTY □ scc СОМ □отн PTY scc □ сом □ отн ☐ PTY \square scc СОМ PTY □ scc Attach additional information on appropriately labeled continuation sheets. **SUBTOTAL** Schedule C Summary

FPPC Form 460 (JUNE/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

COM- Recipient Committee

(other than PTY or SCC)

SCC - Small Contributor Committee

*Contributor Codes

IND - Individual

OTH - Other PTY - Political Party

1. Amount received this period - nonmonetary contributions of \$100 or more.

3. Total nonmonetary contributions received this period.

(Include all Schedule C subtotals.).....

2. Amount received this period - unitemized nonmonetary contributions of less than \$100

Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees

Type or print in ink.

Amounts may be rounded to whole dollars.

		;	SCHEDULE D
Stat	ement covers period	CALIFORNIA	460
from	06/24/2018	FORM	700
through	06/30/2018	Page 9	of <u>28</u>
		I.D. NUMBER	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
San Diego County Democratic Party

through 06/30/2018 Page 9 of 28

I.D. NUMBER 741906

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/29/2018	Payee Name: Nathan Fletcher for Supervisor 2018 Candidate Name: Nathan Fletcher County Supervisor District 4	Monetary Contribution		\$25,000.00	\$966,057.51	
	Jurisdiction: San Diego County	Nonmonetary Contribution				
	Support Oppose	Independent Expenditure				
6/29/2018	Payee Name: Dr. Jen Campbell for City Council 2018 Candidate Name: Jen Campbell City Council Member	Monetary Contribution		\$1,000.00	\$1,072.85	
	District 2 Jurisdiction: City of San Diego	Nonmonetary Contribution				
	Support Oppose	Independent Expenditure				
		Monetary Contribution				
		Nonmonetary Contribution				
		Independent Expenditure				
	Support Oppose	Experialitate				
			SUBTOTAL	\$26,000.00		

Schedule D Summary

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)		\$26,000.00
2. Unitemized contributions and independent expenditures made this period of under \$100		\$0.00
3 Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	ΤΟΤΑΙ	\$26,000.00

Schedule E Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers period	CALIFORNIA 160
from06/24/2018	FORM 400
through <u>06/30/2018</u>	Page 10 of 28
	I.D. NUMBER 741906

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Diego County Democratic Party

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CNS CTB CVC	campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees	MTG OFC PET	member communications meetings and appearances office expenses petition circulating phone banks	RFD SAL TEL	radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals
	fundraising events independent expenditure supporting/opposing others (explain)*		polling and survey research postage, delivery and messenger services		staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor
LEG LIT	legal defense campaign literature and mailings		professional services (legal, accounting) print ads		voter registration information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE (DR DESCRIPTION OF PAYMENT	AMOUNT PAID
Grassroots Resources San Diego, CA 92101	MBR	1397525)	\$1,909.00
Grassroots Resources San Diego, CA 92101	MBR	Phonebank Coordinated for Citizens for Real Term Limits, Yes on C, No on B (ID# 1400312)	\$2,553.00
Grassroots Resources San Diego, CA 92101	MBR	Phonebank Coordinated for Yes on A for a Safer Chula Vista (ID# 1403919)	\$1,773.00

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$53,824.80
2. Unitemized payments made this period of under \$100.	\$0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$0.00
4. Total navments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page. Column A. Line 6.).	\$53,824.80

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE E (CONT.)
Statement covers period	CALIFORNIA 460
from06/24/2018	FORM 400
through <u>06/30/2018</u>	Page <u>11</u> of <u>28</u>
	I.D. NUMBER 741906

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Diego County Democratic Party

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Grassroots Resources San Diego, CA 92101	MBR	Robocall Coordinated for Re-Elect Myrtle Cole for City Council 2018 (ID# 1394504)	\$108.82
Secretary of State Sacramento, CA 95814	OFC		\$100.00
Nathan Fletcher for Supervisor 2018 Encinitas, CA 92024	СТВ		\$25,000.00
Committee ID: 1397572			
Dr. Jen Campbell for City Council 2018 San Diego, CA 92117	СТВ		\$1,000.00
Committee ID: 1398814			
ActBlue Technical Services Cambridge, MA 02138	OFC		\$12.85

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

<u></u>	SCHEDULE E (CONT.)		
Statement covers period	CALIFORNIA 160		
from06/24/2018	FORM 400		
through <u>06/30/2018</u>	Page <u>12</u> of <u>28</u>		
	I.D. NUMBER 741906		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Diego County Democratic Party

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER L.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Card Service Center Dallas, TX 75247	MBR	Robo Calls coordinated for MacFarland for Chula Vista City Council 2018, ID #1397525	\$77.20
Card Service Center Dallas, TX 75247	MBR	Robo Calls coordinated for Nathan Fletcher for Supervisor 2018 (ID #1397572)	\$1,290.93
San Diego County Democratic Party - Federal Sacramento, CA 95815		Transfer of Non-Federal Share of Allocable Expense	\$20,000.00

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$53,824.80

Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.

Amounts may be rounded to whole dollars.

			OOLIEDOEE I
Staten	ment covers period	CALIFORNIA	160
rom	06/24/2018	FORM	400
hrough	06/30/2018	Page 13	of 28

I.D. NUMBER

741906

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

San Diego County Democratic Party

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Grassroots Resources San Diego, CA 92101	MBR Phonebank Coordinated for Citizens for Real Term Limits, Yes on C, No on B (ID# 1400312)	\$2,553.00	\$0.00	\$2,553.00	\$0.00
Grassroots Resources San Diego, CA 92101	MBR Phonebank Coordinated for Patrick MacFarland for City Council 2018 (ID# 1397525)	\$1,909.00	\$0.00	\$1,909.00	\$0.00
Card Service Center Dallas, TX 75247	MBR Robo Calls coordinated for MacFarland for Chula Vista City Council 2018, ID #1397525	\$77.20	\$0.00	\$77.20	\$0.00

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTALS

Schedule F Summary

 Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for
accrued expenses of \$100 or more, plus total	unitemized accrued expenses under \$100.)

INCURRED TOTALS \$0.00

2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.).....

PAID TOTALS \$7,711.95

3. Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.).....

NET (\$7,711.95)

May be a negative number.

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded to whole dollars.

		00.12	BOLL : (00111.)
Statement covers period		CALIFORN	460
from _	06/24/2018	FORM	700
through	06/30/2018	Page 14	_ of <u>28</u>

NAME OF FILER

San Diego County Democratic Party

I.D. NUMBER 741906

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.					
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs			
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions			
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries			
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs			
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals			
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals			
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor			
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration			
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)			
*Payments that are contributions or independent expenditures must also be summarized on Schedule D					

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Card Service Center Dallas, TX 75247	MBR Robo Calls coordinated for Nathan Fletcher for Supervisor 2018 (ID #1397572)	\$1,290.93	\$0.00	\$1,290.93	\$0.00
SDI Staffing San Diego, CA 92108	MBR Phonebank coordinated for Re-Elect Myrtle Cole for City Council 2018 (ID#1394524)	\$1,656.64	\$0.00	\$0.00	\$1,656.64
SDI Staffing San Diego, CA 92108	MBR Phonebank coordinated for Nathan Fletcher for Supervisor 2018 (ID#1397572)	\$1,656.65	\$0.00	\$0.00	\$1,656.65
Grassroots Resources San Diego, CA 92101	MBR Robocall Coordinated for Re-Elect Myrtle Cole for City Council 2018 (ID# 1394504)	\$108.82	\$0.00	\$108.82	\$0.00

SUBTOTALS

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded to whole dollars.

CALIFORNIA 4 Statement covers period 06/24/2018 through 06/30/2018of 28Page <u>15</u>

NAME OF FILER San Diego County Democratic Party

I.D. NUMBER 741906

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.					
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs			
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions			
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries			
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs			
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals			
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals			
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor			
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration			
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)			
*Payments that are contributions or independent expenditures must also be summarized on Schedule D.					

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Grassroots Resources San Diego, CA 92101	MBR Phonebank Coordinated for Yes on A for a Safer Chula Vista (ID# 1403919)	\$1,773.00	\$0.00	\$1,773.00	\$0.00
	SUBTOTALS	\$11,025.24	\$0.00	\$7,711.95	\$3,313.29

Type or print in ink.

Amounts may be rounded to whole dollars.

	OOTILDOLL
Statement covers period	CALIFORNIA A CO
from06/24/2018	FORM 40U
through _06/30/2018	Page 16 of 28
	I.D. NUMBER 741906

SCHEDULE G

NAME OF AGENT OR INDEPENDENT CONTRACTOR San Diego County Democratic Party - Federal

SEE INSTRUCTIONS ON REVERSE

San Diego County Democratic Party

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications RAD radio airtime and production costs CMP campaign paraphernalia/misc. CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals fundraising events POL polling and survey research IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services transfer between committees of the same candidate/sponsor VOT voter registration LEG legal defense PRO professional services (legal, accounting) campaign literature and mailings PRT print ads WEB information technology costs (internet, email) * Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR CODE OR **DESCRIPTION OF PAYMENT AMOUNT PAID** (IF COMMITTEE, ALSO ENTER I.D. NUMBER) 8304 Clairemont Mesa Blvd., LLC OFC \$1,524.70 San Diego, CA 92111 OFC \$2,370.00 Danka Pantich San Marco, CA 92069 8304 Clairemont Mesa Blvd., LLC OFC \$3,134.51 San Diego, CA 92111 Andrea Duran Aydogan OFC \$71.46 Chula Vista, CA 91913

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$7100.67

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE G	
Statement covers period	CALIFORNIA ACO	
from06/24/2018	FORM 46U	
through _06/30/2018	Page <u>17</u> of <u>28</u>	
	I.D. NUMBER 741906	

NAME OF AGENT OR INDEPENDENT CONTRACTOR San Diego County Democratic Party - Federal

SEE INSTRUCTIONS ON REVERSE

San Diego County Democratic Party

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications CMP campaign paraphernalia/misc. RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense PRO professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT WEB information technology costs (internet, email) print ads

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYM	MENT AMOUNT PAID
Andrea Duran Aydogan Chula Vista, CA 91913	TRS	\$15.07
Andrea Duran Aydogan Chula Vista, CA 91913	OFC	\$297.56
Card Service Center Dallas, TX 75247	OFC	\$53.06
Card Service Center Dallas, TX 75247	OFC	\$722.04

Attach additional information on appropriately labeled continuation sheets.

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

TOTAL* \$1087.73

Type or print in ink.

Amounts may be rounded to whole dollars.

	OOTILDOLL
Statement covers period	CALIFORNIA A CO
from06/24/2018	FORM 460
through _06/30/2018	Page <u>18</u> of <u>28</u>
	I.D. NUMBER 741906

SCHEDULE G

NAME OF AGENT OR INDEPENDENT CONTRACTOR San Diego County Democratic Party - Federal

SEE INSTRUCTIONS ON REVERSE

San Diego County Democratic Party

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications CMP campaign paraphernalia/misc. RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense PRO professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT WEB information technology costs (internet, email) print ads * Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESC	RIPTION OF PAYMENT AMOUNT PAID
Card Service Center Dallas, TX 75247	OFC	\$8.18
Card Service Center Dallas, TX 75247	OFC	\$15.88
Card Service Center Dallas, TX 75247	OFC	\$33.97
Card Service Center Dallas, TX 75247	FND	\$39.83

Attach additional information on appropriately labeled continuation sheets.

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

TOTAL* \$97.86

Type or print in ink. Amounts may be rounded to whole dollars.

	002022
Statement covers period	CALIFORNIA A CO
from06/24/2018	FORM 46U
through _06/30/2018	Page 19 of 28
	I.D. NUMBER 741906

SCHEDULE G

NAME OF AGENT OR INDEPENDENT CONTRACTOR San Diego County Democratic Party - Federal

SEE INSTRUCTIONS ON REVERSE

San Diego County Democratic Party

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications CMP campaign paraphernalia/misc. RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees FIL PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense PRO professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Card Service Center Dallas, TX 75247	OFC		\$61.62
Card Service Center Dallas, TX 75247	WEB		\$81.74
Card Service Center Dallas, TX 75247	OFC		\$135.07
Card Service Center Dallas, TX 75247	OFC		\$167.76

Attach additional information on appropriately labeled continuation sheets.

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

TOTAL* \$446.19

Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period	CALIFORNIA A CO
from06/24/2018	FORM 40U
through _06/30/2018	Page <u>20</u> of <u>28</u>
	I.D. NUMBER 741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR San Diego County Democratic Party - Federal

SEE INSTRUCTIONS ON REVERSE

San Diego County Democratic Party

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications CMP campaign paraphernalia/misc. RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals POL TRS staff/spouse travel, lodging, and meals FND fundraising events polling and survey research IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor VOT voter registration LEG legal defense PRO professional services (legal, accounting) campaign literature and mailings PRT print ads WEB information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Card Service Center Dallas, TX 75247	POS		\$10.59
Card Service Center Dallas, TX 75247	OFC		\$11.73
Card Service Center Dallas, TX 75247	OFC		\$95.42
Card Service Center Dallas, TX 75247	WEB		\$300.20
Attach additional information on appropriately labeled continuation she	ets.		TOTAL* \$417.94

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Type or print in ink.

Amounts may be rounded to whole dollars.

	COLLEGE
Statement covers period	CALIFORNIA A CO
from06/24/2018	FORM 40U
through _06/30/2018	Page 21 of 28
	I.D. NUMBER 741906

SCHEDULE G

NAME OF AGENT OR INDEPENDENT CONTRACTOR San Diego County Democratic Party - Federal

SEE INSTRUCTIONS ON REVERSE

San Diego County Democratic Party

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications CMP campaign paraphernalia/misc. RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals fundraising events POL polling and survey research IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services transfer between committees of the same candidate/sponsor VOT voter registration LEG legal defense PRO professional services (legal, accounting) campaign literature and mailings PRT print ads WEB information technology costs (internet, email) * Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR CODE OR **AMOUNT PAID DESCRIPTION OF PAYMENT** (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Card Service Center OFC \$643.99 Dallas, TX 75247 Deane & Company PRO \$1,595.09 Sacramento, CA 95815 Kyle C. Doria LIT \$125.46 Chula Vista, CA 91913 Kyle C. Doria TRS \$6.20 Chula Vista, CA 91913

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$2370.74

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Type or print in ink.

Amounts may be rounded to whole dollars.

	OOTILDOLL	
Statement covers period	CALIFORNIA A C	
from06/24/2018	FORM 40U	
through _06/30/2018	Page 22 of 28	
	I.D. NUMBER 741906	

SCHEDULE G

NAME OF AGENT OR INDEPENDENT CONTRACTOR San Diego County Democratic Party - Federal

SEE INSTRUCTIONS ON REVERSE

San Diego County Democratic Party

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications CMP campaign paraphernalia/misc. RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals fundraising events POL polling and survey research IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services transfer between committees of the same candidate/sponsor VOT voter registration LEG legal defense PRO professional services (legal, accounting) campaign literature and mailings PRT print ads WEB information technology costs (internet, email) * Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR CODE OR **DESCRIPTION OF PAYMENT AMOUNT PAID** (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Kyle C. Doria TRS \$8.52 Chula Vista, CA 91913 Kyle C. Doria TRS \$26.35 Chula Vista, CA 91913 OFC \$71.10 Kyle C. Doria Chula Vista, CA 91913 Kyle C. Doria TRS \$3.16 Chula Vista, CA 91913

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$109.13

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period	CALIFORNIA A CO
from06/24/2018	FORM 40U
through _06/30/2018	Page <u>23</u> of <u>28</u>
	I.D. NUMBER 741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR San Diego County Democratic Party - Federal

SEE INSTRUCTIONS ON REVERSE

San Diego County Democratic Party

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications CMP campaign paraphernalia/misc. RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals POL TRS staff/spouse travel, lodging, and meals FND fundraising events polling and survey research IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense PRO professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
OFC		\$194.74
TRS		\$31.00
FND		\$39.56
TRS		\$751.44
	OFC TRS FND	TRS FND

Attach additional information on appropriately labeled continuation sheets.

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

TOTAL* \$1016.74

Type or print in ink. Amounts may be rounded to whole dollars.

	OOTILDOLL
Statement covers period	CALIFORNIA A CO
from06/24/2018	FORM 40U
through _06/30/2018	Page 24 of 28
	I.D. NUMBER 741906

SCHEDULE G

NAME OF AGENT OR INDEPENDENT CONTRACTOR San Diego County Democratic Party - Federal

SEE INSTRUCTIONS ON REVERSE

San Diego County Democratic Party

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications CMP campaign paraphernalia/misc. RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor VOT voter registration LEG legal defense PRO professional services (legal, accounting) campaign literature and mailings PRT print ads WEB information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Grassroots Resources San Diego, CA 92101	TRS			\$669.02
Jessica H. Hayes Chula Vista, CA 91915	TRS			\$276.54
Jessica H. Hayes Chula Vista, ČA 91915	TRS			\$44.40
Hilton San Diego Bayfront San Diego, CA 92101	FND			\$2,169.53

Attach additional information on appropriately labeled continuation sheets.

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

TOTAL* \$3159.49

Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period	CALIFORNIA A CO
from06/24/2018	FORM 40U
through _06/30/2018	Page <u>25</u> of <u>28</u>
	I.D. NUMBER 741906

NAME OF AGENT OR INDEPENDENT CONTRACTOR San Diego County Democratic Party - Federal

SEE INSTRUCTIONS ON REVERSE

San Diego County Democratic Party

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications CMP campaign paraphernalia/misc. RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor VOT voter registration LEG legal defense PRO professional services (legal, accounting) campaign literature and mailings PRT print ads WEB information technology costs (internet, email)

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
I Guard Security Services San Diego, CA 92121	OFC		\$221.20
Konica Minolta Business Solutions U.S.A., Inc. Ramsey, NJ 07446	OFC		\$150.26
Konica Minolta Business Solutions U.S.A., Inc. Ramsey, NJ 07446	OFC		\$110.33
Amanda B. Mascia Oceanside, CA 92056	CNS		\$1,315.35
Attach additional information on appropriately labeled continuation she	eets.		TOTAL* \$1797.14

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Type or print in ink. Amounts may be rounded to whole dollars.

Statement covers period	CALIFORNIA A CO
from06/24/2018	FORM 40U
through _06/30/2018	Page 26 of 28
	I.D. NUMBER 741906

SCHEDULE G

NAME OF AGENT OR INDEPENDENT CONTRACTOR San Diego County Democratic Party - Federal

SEE INSTRUCTIONS ON REVERSE

San Diego County Democratic Party

NAME OF FILER

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications CMP campaign paraphernalia/misc. RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals POL TRS staff/spouse travel, lodging, and meals FND fundraising events polling and survey research IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor VOT voter registration LEG legal defense PRO professional services (legal, accounting) campaign literature and mailings PRT print ads WEB information technology costs (internet, email) * Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE O	DR DESCRIPTION OF PAYMENT	AMOUNT PAID
NGP VAN, Inc. Washington, DC 20005	OFC		\$789.25
NGP VAN, Inc. Washington, DC 20005	OFC		\$67.50
8304 Clairemont Mesa Blvd., LLC San Diego, CA 92111	OFC		\$1,497.05

Attach additional information on appropriately labeled continuation sheets.

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

TOTAL* \$2353.80

Sched	ule H –	
Loans	Made to	Others*

Type or print in ink.

	SCHEDULE H
CALIFORNIA	460

Loans Made to Others*	Amounts may be rounded to whole dollars.		Statement covers period from 06/24/2018		CALIFORNIA 460			
EE INSTRUCTIONS ON REVERSE					through <u>06/30/20</u>	018	Page <u>27</u>	of <u>28</u>
IAME OF FILER San Diego County Democratic Party							I.D. NUMBER 741906	
ULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				PAID				CALENDAR YEAR
				FORGIVEN		RATE %		PER ELECTION**
					DATE DUE		DATE INCURRED	
				PAID				CALENDAR YEAR
				FORGIVEN		RATE %		PER ELECTION**
				-	DATE DUE		DATE INCURRED	-
Loans that are contributions to another candidate nust also be summarized on Schedule D. Loans also be reported on Schedule E.	forgiven must	SUBTOTALS						
						(Enter (e) on Schedule I, Line 3)		
Schedule H Summary							_	
. Loans made this period Total Column (b) plus unitemized loans	less than \$100.)							** If Required
Payments received on loans Total Column (c) plus unitemized paym								
B. Net change this period. (Subtract Line Enter the net here and on the Summan	e 2 from Line 1.)y Page, Column A, Line 7.))			NET(May be a ne	gative number)		

Schedule I

Type or print in ink.

		SCHEDULE I
St	atement covers period	CALIFORNIA A CO
from _	06/24/2018	CALIFORNIA 460

Miscellaneous Increases to Cash		mounts may be rounded to whole dollars.	Statement covers period from06/24/2018	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER San Diego County Democratic Party				Page 28 of 28 I.D. NUMBER 741906
5/29/2018	San Diego County Democratic Party - Federal Sacramento, CA 95815	Transfer from Affiliated	1 Committee	\$7,500.00
Attach additional information on appropriately labeled continuation sheets.				FAL \$7,500.00
Schedule I	Summary			
1. Increases to	o cash of \$100 or more this period	\$7,500.00	_	
2. Unitemized increases to cash under \$100 this period.			\$0.00	<u> </u>
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)				_
	ellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter Page, Line 14.)	TOTAL \$7,500.00	_	